

Application No.: 10/618,741  
Reply to Office Action of January 10, 2005

Attorney Docket No.: RTN2-118PUS

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**PATENT**  
**APR 25 2005**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/618,741  
Applicant : Thomas M. Hartnett et al.  
Filed : July 18, 2000  
T.C./A.U. : 1731  
Examiner : John M. Hoffmann

Confirmation No. : 8640


Docket No. : RTN2-118PUS

**CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8(a))**

I hereby certify that this correspondence is, on the date set forth below, being transmitted by facsimile to the Patent and Trademark Office at 703-872-9306.

4-25-2005  
Date of Signature  
and Transmission

By:

  
Richard M. Sharkansky

**REQUEST FOR EXTENSION OF TIME**

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

It is requested that the time for response to the Office Action mailed January 10, 2005 be extended for a one-month period of time to end May 10, 2005, under the provisions of 37 C.F.R. §1.136.

Please charge such amount of \$120.00 called for by 37 C.F.R. §1.17 to the Patent and Trademark Office Deposit Account No. 50-3192.

In the event any additional fee is required, please charge such amount to the Patent

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Dated: 4-25-2005

Respectfully submitted,

By: 

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PTO/SB/17 (12-04v2)

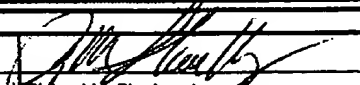
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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number 09/618,741 Filing Date July 18, 2000 First Named Inventor Hartnett Examiner Name John M. Hoffmann Art Unit 1731 Attorney Docket No. RTN2-118PUS	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 520.00			

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-3192 Deposit Account Name: Richard M. Sharkansky For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b> Application Type Fee (\$) Small Entity Fee (\$)		<b>SEARCH FEES</b> Fee (\$) Small Entity Fee (\$)		<b>EXAMINATION FEES</b> Fee (\$) Small Entity Fee (\$)		<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>						<b>Small Entity</b> Fee (\$) Fee (\$)	
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b> <u>31</u> <b>Extra Claims</b> <u>0</u> <b>Fee (\$)</b> <u>0</u> <b>Fee Paid (\$)</b> <u>0</u>						<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> <u>0</u> <b>Fee Paid (\$)</b> <u>0</u>	
HP = highest number of total claims paid for, if greater than 20. <b>Indep. Claims</b> <u>7</u> <b>Extra Claims</b> <u>2</u> <b>Fee (\$)</b> <u>200</u> <b>Fee Paid (\$)</b> <u>400</u>							
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). <b>Total Sheets</b> <u>31</u> <b>Extra Sheets</b> <u>0</u> <b>Number of each additional 50 or fraction thereof</b> <u>0</u> <b>Fee (\$)</b> <u>0</u> <b>Fee Paid (\$)</b> <u>0</u> <u>31</u> - 100 = <u>0</u> / 50 = <u>0</u> (round up to a whole number) x <u>0</u> = <u>0</u>							
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b> <u>130</u>	
Other (e.g., late filing surcharge): One Month Extension of Time						<u>120</u>	

<b>SUBMITTED BY</b>		
Signature 	Registration No. (Attorney/Agent) 25,800	Telephone 508 477 4311
Name (Print/Type) Richard M. Sharkansky	Date 4-25-2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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